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APPLICANTS

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IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY WI	SHEETS DRAWING 7	TOTAL CLAIMS <i>23</i>	INDEPENDENT CLAIMS <i>5</i>
35 USC, 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged	Examiner's Signature <i>tl</i>	Initials <i>tl</i>	

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TITLE

METHOD AND APPARATUS FOR ASSOCIATING A FIELD REPLACEABLE UNIT WITH A MEDICAL
 DIAGNOSTIC SYSTEM AND RECORDING OPERATIONAL DATA

FILING FEE	FEES: Authority has been given in Paper	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of
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